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CONFIRMATION NO. 4107

<b>SERIAL NUMBER</b> 10/648,933	<b>FILING DATE</b> 08/27/2003  <b>RULE</b>	<b>CLASS</b> 340	<b>GROUP ART UNIT</b> 2636	<b>ATTORNEY DOCKET NO.</b> 21138.104US
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**APPLICANTS**

Gregory E. Webb SR., Arlington Heights, IL;

**\*\* CONTINUING DATA \*\*\*\*\*** *yes DP*  
 This application is a CIP of 10/464,523 06/17/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None DP*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
**\*\* 11/18/2003**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>DP</i> Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 52	<b>INDEPENDENT CLAIMS</b> 3
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**TITLE**  
 System and method for monitoring a security of an asset

<b>FILING FEE RECEIVED</b> 663	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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